

Technical Assistance and Services Center

Flex Program Hour Highlights

Date: April 11, 2001 Topic: Rural EMS

Moderator: Terry Hill, TASC

EMS Legislation

Gary Wingrove, from Gold Cross Ambulance in Minnesota, gave an update on national legislation affecting EMS in rural areas. Sen. Kent Conrad of North Dakota recently introduced S.587 that provides for rural EMS grants. On April 20, Congressman Kennedy from Minnesota will be introducing an additional rural EMS bill and details will be available via the North Central EMS Cooperative web site (www.ncemsc.org).

NOSORH EMS Taskforce

Denny Berens, Director of the Nebraska State Office of Rural Health, chairs the NOSORH EMS Taskforce that was assembled in September 2000. Although Denny was unable to attend the Flex Program Hour, Terry Hill outlined the main EMS issues the Taskforce has identified:

- Reimbursement Models are needed for CAHs to do billing for local ambulance services.
- Recruitment and retention An EMS leadership model is needed; quality improvement is part of the larger issue.
- Restructuring Support and encourage the formation of locally-operated provider networks in rural areas.

The Taskforce has drafted an *EMS Policy Ideas/Recommendations* that will be shared at each of the NOSORH regional meetings and reviewed at TASC's National Flex/CAH Conferences this summer. This document details specific actions in each of the areas listed above.

State Initiatives

Arkansas – Rebecca Brosius reported their office offered mini-grants of \$3,500 to each of their CAHs for EMS projects that would "bind them together." The proposed projects look very promising and she'll provide an update at the National Flex/CAH Conferences.

Florida – Mike Walsh reported their office sent out an assessment tool to all 37 EMS providers in the state (their CAH Coordinator was ex-EMS employee, so feedback was especially high.) The results, which they expected, showed the majority of responses mentioning recruitment and retention as well as training. They have developed an internal management tool to use within the EMS office and are starting to put it into practice with R/R program.

Idaho – Mary Sheridan outlined their initiatives in EMS technical assistance using a benchmarking system. They send a facilitator into the CAH community and do assessment; they meet with stakeholders, EMS providers, hospital personnel, etc. A document is created based on benchmark info

and recommendations are made on each. Mary will present additional information on their program at the National Flex/CAH Conference in June.

Wisconsin – Lillian Redding mentioned that a retired state employee who worked in EMS is heading their EMS initiative/assessment. They have 17 CAHs and 12 have been assessed.

Kansas – Dick Morrissey noted Kansas' EMS Integration Committee and its work over the first part of the year. They have identified their main issues – quality, financing and state policy – and published their findings in a report. A key task of the committee is to recommend strategies to encourage existing and future networks to include EMS providers and to incorporate EMS systems into network activities and functions. For a copy of the report, contact tasc@ruralcenter.org.

North Dakota – Deb Moreno noted they have EMT continuing education on-line. For details, visit http://www.health.state.nd.us/ndhd/resource/dehs/dehs.htm.

Minnesota – Gary Wingrove reported that MN will soon have a rural paramedic Internet course, a combination of CD-ROM, streaming video, and on-site clinical work. He also noted the work of the North Central EMS Cooperative (www.ncemsc.org), a five-state ambulance purchasing group in MN, WI, IA, SD, and ND. The co-op has used a public bidding process (all vendors have access) and they are saving approximately \$25,000 per ambulance through the collective volume of this buying group.

Iowa – Marvin Firch discussed Iowa's initiative of merging CAH funds, EMS funds, and economic development funds to make \$35,000 available to counties to update EMS systems. Twenty counties responded to the RFP to share in the \$321K available.